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## BIB DATA SHEET

CONFIRMATION NO. 2438

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/569,311	02/22/2006	424	1645	I-2003.009 US	
<b>RULE</b>					
<b>APPLICANTS</b> Paul S. Cohen, Narragansett, RI; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/27896 08/26/2004 which claims benefit of 60/498,988 08/29/2003 and claims benefit of 60/498,961 08/29/2003 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/24/2007					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /PATRICIA ANN DUFFY/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> RI	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Intervet/Schering-Plough Animal Health PATENT DEPARTMENT PO BOX 318 29160 Intervet Lane MILLSBORO, DE 19966-0318 UNITED STATES					
<b>TITLE</b> Live Attenuated Bacterial Vaccine					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		